

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

U.S. Patent Application	)	
AKI et al.	)	
cation 09/890,929	) ) Art U:	nit 1631
August 7, 2001	,	
METHOD AND SYSTEM FOR	)	
DISPLAYING DENDROGRAM	)	
	)	
ney Docket No. HIRA.0038	)	
		AKI et al.  cation 09/890,929  August 7, 2001  METHOD AND SYSTEM FOR  DISPLAYING DENDROGRAM  )  (Art Unit of the control of th

Commissioner of Patents P.O. Box 1450 Alexandria, VA 22313-1450

## **COVER LETTER**

Sir:

[x] The fee for submission of claims is calculated as shown below:

For	TOTAL WITH NEW CLAIMS ADDED	TOTAL Currently On File	CLAIMS ALREADY PAID	RATE	CALCULATION
Total Claims	26	26	6 (Over 20)	x \$50	0.00
Independent Claims	5	, 5	(Over 3)	x \$200	0.00
MULTIPLE DEPENDENT CLAIM(S)		4	PAID	+ \$360	0
REDUCTION FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, 1.27, 1.28). $\times \frac{1}{2}$ IF APPLICABLE, VERIFIED STATEMENT MUST BE ATTACHED					
TOTAL		0.00			

In addition, the below-identified communications a proceeding:	re submitted in the above-captioned application or
[x] Response/Preliminary Amendment (with Claim Amendments)	[x] Petition for Extension of Time (3 month) [] Terminal Disclaimer
<ul><li>[ ] Substitute Spec. &amp; marked-up copy</li><li>[ ] Preliminary Amendment</li><li>[ ] Other</li></ul>	[ ] Letter to Draftsperson w/ sheets of replacement drawings

NOV 2 9 2000	blease charge my <b>Deposit Account Number</b> in the amount of to cover the fees for A duplicate copy of this paper is enclosed.
[x]	Checks in the amount of \$1,020.00 to cover the 3-month Extension-of-Time fee and are enclosed.
[x]	The Commissioner is hereby authorized to charge any additional fees associated with this communication, or credit any overpayment to <b>Deposit Account Number 08-1480</b> .

Respectfully submitted,

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November 29, 2006